

UNITED STATES BANKRUPTCY COURT
DISTRICT OF NEW JERSEY

Caption in Compliance with D.N.J. LBR 9004-1(b)

2240 Highway 33
Suite 112
Neptune, New Jersey 07753
732-988-1500
Attorney for Debtor(s)
courtdocs@oliverandlegg.com

In Re:

John Hofer,
Debtor

Case No.: 22-17932

Chapter: 7

Adv. No.:

Hearing Date:

Judge: Christine M. Gravelle

CERTIFICATION OF SERVICE

1. I, Marie Chamra :

☐ represent in this matter.

☒ am the secretary/paralegal for Oliver & Legg, who represents
the debtor(s) in this matter.

☐ am the in this case and am representing myself.

2. On 12/26/2024, I sent a copy of the following pleadings and/or documents
to the parties listed in the chart below.

Order of Conversion from Chapter 13 to Chapter 7 and the Amendment Order approving the
addition of one creditor.

3. I certify under penalty of perjury that the above documents were sent using the mode of service
indicated.

Date: 12/26/2024

/s/ Marie Chamra
Signature

| Name and Address of Party Served | Relationship of Party to the Case | Mode of Service |
|---|-----------------------------------|---|
| John Michael McDonnell 115 Maple Ave Ste 201 Red Bank, NJ 07701-1753 | Trustee | <input type="checkbox"/> Hand-delivered <input type="checkbox"/> Regular mail <input type="checkbox"/> Certified mail/RR <input checked="" type="checkbox"/> Other <u>ECF</u> (As authorized by the Court or by rule. Cite the rule if applicable.) |
| Ocean Orthopedic co Mazzoni Law 1170 East Landis Ave Vineland, NJ 08360-4230 | Creditor | <input type="checkbox"/> Hand-delivered <input checked="" type="checkbox"/> Regular mail <input type="checkbox"/> Certified mail/RR <input type="checkbox"/> Other _____ (As authorized by the Court or by rule. Cite the rule if applicable.) |
| Ocean Orthopedic Associates 20 Hospital Dr Suite 12 Toms River, NJ 08755 | Creditor | <input type="checkbox"/> Hand-delivered <input checked="" type="checkbox"/> Regular mail <input type="checkbox"/> Certified mail/RR <input type="checkbox"/> Other _____ (As authorized by the Court or by rule. Cite the rule if applicable.) |
| | Creditor | <input type="checkbox"/> Hand-delivered <input type="checkbox"/> Regular mail <input type="checkbox"/> Certified mail/RR <input type="checkbox"/> Other _____ (As authorized by the Court or by rule. Cite the rule if applicable.) |
| | Creditor | <input type="checkbox"/> Hand-delivered <input type="checkbox"/> Regular mail <input type="checkbox"/> Certified mail/RR <input type="checkbox"/> Other _____ (As authorized by the Court or by rule. Cite the rule if applicable.) |